

STATE OF OHIO

0000002

167663

MONTGOMERY COUNTY

DISTRICT BOARD OF HEALTH

Application for License to Operate Solid Waste Disposal Site (X) Facility ()
(check one)

Name of Applicant ALCINE GRILLOT

Address 2708 Kreitzer Road

Name of Site or Facility South Dayton Dump and Landfill

Location of Site or Facility 1975 Springboro Pike

Type of Disposal Solid Fill
(Incinerator, Landfill, Composting)

Nature of Applicant - State () Other Political Subdivision () Individual ()
Corporation () Partnership () Other () Specify _____

Capacity - Incinerator _____ Landfill (Acres) 45 Composting _____

If Incinerator -
Method of Residue Disposal _____
Place of Residue Disposal _____

If Landfill -
Type of Operation Fill, Compact & Cover
(Trench, etc.)

If Composting -
Method _____

General Classification of Solid Wastes to be Accepted.

Household _____ Commercial X Industrial X
Agricultural _____ Incinerator Residue Only _____ Other _____

Geographic Area to be Served Unlimited
(If Not Limited - Write Unlimited)

Fee \$ 500.00 included with application

The applicant agrees to operate the solid waste disposal site
(Site or Facility)

in compliance with Sections 3734.01 to 3734.11 inclusive, of the Revised Code and Regulations
HE-24-01 to HE-24-12 of the Ohio Sanitary Code.

Approved 1-3-67
(Date)

Alcine Grillot
Alcine Grillot
(Signature of Applicant or his Agent)

Denied _____
(Date)

Partner
(Title)

Action by R. A. H. 220
(Health Commissioner)

2708 Kreitzer Road
(Address)

Issued 367 5
(Date - License Number)

December 31, 1968
(Date)

STATE OF OHIO

Montgomery, County DISTRICT BOARD OF HEALTHNot Processed
File in 5 Day Dir.Application for License to Operate Solid Waste Disposal Site (X) Facility ()
(check one)Name of Applicant ALLINE GRIFFINAddress 2708 Knitzner Rd.Name of Site or Facility South Dayton Dump and FillLocation of Site or Facility 1975 Springboro Pk.Type of Disposal Solid Fill ~~Buttress Wood Piles~~Nature of Applicant - State () Other Political Subdivision () Individual ()
Corporation () Partnership (X) Other () Specify _____Capacity - Incinerator _____ Landfill (Acres) 45 Composting _____

If Incinerator -

Method of Residue Disposal _____

Place of Residue Disposal _____

If Landfill: ~~Burning operation of materials which incinerator~~
~~can handle will cover when plant is completed.~~
Type of Operation Fill, compact, & cover (Trench, etc.)

If Composting -

Method _____

General Classification of Solid Wastes to be Accepted.

Household _____ Commercial ✓ Industrial ✓
Agricultural _____ Incinerator Residue Only _____ Other ~~Excluded~~Geographic Area to be Served unlimited
500 (If Not Limited - Write Unlimited)Fee \$ 500 included with application no landfill of putrescible material is acceptedThe applicant agrees to operate the solid waste disposal Site
(Site or Facility)in compliance with Sections 3734.01 to 3734.11 inclusive, of the Revised Code and Regulations
HE-24-01 to HE-24-12 of the Ohio Sanitary Code.Approved _____
(Date)Alison Griffin

(Signature of Applicant or his Agent)

Denied _____
(Date)Partner
(Title)Action by _____
(Health Commissioner)2708 Knitzner Rd.
(Address)Issued _____
(Date - License Number)Dec. 31 1968
(Date)